

**ANTI-TERRORISM PLAN
FOR
LCpl IM HARD/Passport # xxxxxxxxxx Exp xxxxxxxxxx
Dates of requested travel
Where are you going**

1. Estimate of the Situation:

a. Intelligence and Threat briefings will be completed on: Date that member has received or will receive their threat brief, can be conducted by S-3 or Fort Leonard Wood G-2. Needs to be conducted within two weeks of date of departure.

b. Level 1 Force Protection Brief Completed: Required within 6 months of travel, can be done online at www.at-awareness.org, after completion of training a certificate will be produced that needs to be signed by a Level II Trained Individual, or a Brief conducted by a Level II Individual and submitted to S-3 for entry to unit diary.

c. Current Force Protection Condition (FPCON): Found on DMS Message Board and updated at least weekly.

d. Current Terrorist Threat Level: Same as C or NCIS website.

e. Current Criminal Threat Level: Same as C or NCIS website.

f. Family Care Plan: ____Yes ____No (Check with Key wives Rep)

g. Areas off Limits: Get from S-3, or found on state department web site.

h. Areas authorized for travel: Specify areas member will travel in.

i. AT/FP responsibility: The Marine/Sailor's Unit ATO, or Detachment S-3.

j. Buddy rule: Is in effect for FPCon Countries B and Higher, Moderate and Higher for Terrorist Threat Level. State who buddy is (Name)

k. Theatre/Country Clearance Request Message: Submitted by S-1. Must have DTG before plan is submitted for approval and member cleared for travel.

2. Review of area of operations:

a. Security of billeting: Who is responsible for the area you are staying (i.e. On Base Military Police).

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(1) Primary: Address and contact numbers required here of where you are staying.

(2) Secondary: Required to have a secondary location, address and contact numbers.

b. Security of conference/work areas: N/A for leave, who provides security for your work area on TAD.

c. Areas of vulnerability

(1) Transportation:

(a) Air: Member is required to put flight itinerary in this location. To include airline, times, locations for leaving and returning.

(b) Ground: This is where the member tells how he will get around the sites he/she is visiting etc...

(2) Communication: How will member communicate while in country, in most cases it will read member limited to fixed phones capabilities in public places.

(3) Medical: What Host Nation and Military Treatment Facilities are available.

(a) Local Hospital: Required to have name, address and contact numbers of nearest facility.

3. Emergency Action Plan:

a. Communications: Notification numbers and emergency contacts numbers list in possession of a card listing the following telephone numbers for emergency use.

1. Local Police Department
2. Members address and contact numbers while in country.
3. Company 1stSgt
4. Detachment Duty
5. Fort Leonard Wood Command Duty Officer
6. HQMC Command Center
7. US Embassy

b. Evacuation plans: If SNM and companion have to be evacuated from their primary leave address(which is listed in section 2), SNM and companion will immediately travel to their secondary leave location. If this is not possible, the SNM and companion will proceed to the U.S. Embassy, **location of Embassy in country**. If the U.S. Embassy is not safe or is under a

threat that mandates evacuation, SNM and companion will proceed directly to the nearest airport and take the next available AMC/ commercial flight to the United States, if this is not available, pick another country preferably a low threat country with a final onward movement to the U.S. Lodging will be determined upon arrival on an as required basis.

c. Upon identification of suspicious activity possibly endangering personnel, facilities, or residences, travelers will notify the US Embassy at numbers listed above.

d. Safe Havens: For any threat move to **primary billeting location** (contact numbers listed above). If this is not available proceed to the nearest police station, fire station or hospital. If this is not possible or not accessible and you are not able to locate a safe haven proceed directly to the nearest airport and execute the Emergency Evacuation Plan.

e. Available security: Hotel security for billeting if available and local Police for all other situations. Embassy Security for billeting at the embassy if required.

f. Weapons available to traveler/assigned security personnel: No weapons are authorized.

g. Method of obtaining threat information or FPCON change while traveling: Country FPO, US Embassy, NCIS and State Department web sites.

h. Emergency medical support: Specify where your emergency medical support will come from, either local or military.

i. SNM and companion will follow all FPCON (**Put FPCON For Specified area here**) Measures for travelers as listed in Marine Corps Detachment Order 3302.1, Antiterrorism Force Protection Program, Enclosure (1), Force Protection Conditions. He/she is prepared to follow appropriate measures if the FPCON is raised to a higher level.

4. Attestation Statement:

a. This information is true and accurate as of day, month, year. I senior Member am responsible to inform the Commanding Officer of any changes or deviations to this Anti-Terrorism Force Protection Plan.

DetO 3302.1

SNM signature:_____.Date:_____

AT/FP Officer:_____.Date:_____

Detachment Commander:_____.Date:_____

ENCLOSURE (3)